

This portion MUST be returned with your payment to ensure proper credit. THANK YOU

ACCOUNT BILLED
CRAPO, SHAYNE

PROJECT NAME
WHEELER #1 & #2

PROJECT ID
S270076

DUE DATE
07/27/2001

ANNUAL FEE
\$ 100

AMOUNT DUE
\$ 100

TAX ID OR SOCIAL SECURITY #

<input type="checkbox"/> FEE NOT ENCLOSED
Permittee requests an inspection to close out this permit.

<i>Change of Address</i>	
Contact	_____
Address	_____

State	Zip
Phone	_____

DIVISION OF OIL GAS AND MINING
1594 WEST NORTH TEMPLE SUITE 1210
PO BOX 145801
SALT LAKE CITY UT 84114-5801

Please make check payable to:
Division of Oil, Gas and Mining